

**CITY OF GREENVILLE
INDIVIDUAL RESIDENTIAL
APPLICATION FOR MONTHLY PARKING
RICHARDSON PARKING GARAGE**

NAME _____ (PLEASE PRINT OR TYPE)	BUSINESS NAME _____ (PLEASE PRINT OR TYPE)
HOME ADDRESS _____ (NUMBER AND STREET)	BUSINESS ADDRESS _____ (NUMBER AND STREET)
CITY _____ STATE _____ ZIP _____	CITY _____ STATE _____ ZIP _____
HOME PHONE _____	BUSINESS PHONE _____ DL NO. _____

The parking fee is **\$69.70** per month, and is due in advance, on or before the first day of each month. If the fee is not paid by the 10th of the month, a late fee totaling 10% of the outstanding balance will be added and the AVI tag will be disabled. Once the AVI tag is disabled the daily parking charge must be paid in order to exit the facility and **will not be applied towards your balance or refunded.**

Once the AVI tag is issued it will allow you to park at this facility only. The AVI tag is to be used by **you only, NO EXCEPTIONS.** Unauthorized use of the AVI tag by other persons will result in permanent cancellation of monthly parking privileges at all city parking facilities.

There is a **\$69.70** per AVI tag deposit due, in advance and refundable, without interest, upon surrender of your valid AVI tag. (The deposit will be returned in full provided that all monthly charges are paid in full and the AVI tag is returned to the City no later than the 5th day of the month. If tag is not returned by the 5th day of the month, you will owe for that month.)

Loss of a valid monthly AVI tag results in a replacement fee of **\$50.00** per AVI tag.

NO REFUNDS shall be given for parking fees.

Monthly parkers entering the garage without their AVI tag will be required to pay the prevailing daily rate.

The City of Greenville reserves the right to cancel this agreement , at its discretion, given a thirty (30) day written notice.

The City reserves the right to increase parking fees after giving a thirty (30) day written notice.

Make checks payable to "**CITY OF GREENVILLE**", please put AVI tag number and facility name on your check and mail to City of Greenville, Parking Services Division., P.O. Box 488, Greenville, SC 29602.

The City shall not be responsible for loss, damage to property or personal injury as a result of parking at the above location. The undersigned relieves the City from any and all claims which they may have.

Any vehicle left in this parking building longer than 72 hours (3 days) without notifying the Parking Division, is subject to being towed at the owner=s expense at the discretion of the Greenville Police Department.

SMOKING IS PROHIBITED, BY CITY ORDINANCE, IN STAIRWELLS AND ELEVATORS AT ALL TIMES.

Primary vehicle information:	Secondary vehicle information:
Year _____ Make/Model: _____	Year _____ Make/Model _____
State: _____ Tag# _____	State: _____ Tag # _____
Color: _____	Color: _____

I have read and understand the above application and agree to abide by all rules and regulations of said application.

_____ <i>SIGNATURE OF APPLICANT</i>	_____ <i>DATE</i>
--	----------------------

NOTIFY THE PARKING DIVISION AT 467-4900, WHEN ANY CHANGES IN VEHICLE(S) OR ADDRESS INFORMATION OCCURS.

OFFICE USE ONLY:

Date Issued: _____ **AVI Tag #** _____ **Issued By:** _____ Revised November 7, 2007